



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)

IB-1627

In re Application of Antoni P. Tomsia, et al. ✓

Application Number

09/845,597 ✓

Filed

April 30, 2001 ✓

For Glass/Ceramic Coatings for Implants

Group Art Unit

1775 ✓

Examiner

Sperty, Arden B ✓

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

☐ One month (37 CFR 1.17(a)(1))

\$ _____

☐ Two months (37 CFR 1.17(a)(2))

\$ _____

☐ Three months (37 CFR 1.17(a)(3))

\$ ~~890.00~~

☐ Four months (37 CFR 1.17(a)(4))

\$ _____

☐ Five months (37 CFR 1.17(a)(5))

\$ _____

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 445.00

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0690

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

11/22/02
Date

CR Nold
Signature

12/04/2002 ADSMAN1 00000151 120690 09845597

Charles R. Nold

01 FC:2253

460.00 CH

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.